PAGE 1 / 13

Image# 201609169030841181

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

I ONIVI 3X Fo	or Other Than An Aut	horized Committee	Office Use Only
1. NAME OF TOO COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typing, over the lines.	type 12FE4M5
JEFF PAC			
<u> </u>			
ADDRESS (number and street)	2150 RIVER PLAZA DR. #	50	
Check if different			
than previously reported. (ACC)	SACRAMENTO		CA 95833 -
2. FEC IDENTIFICATION NUM	MBER ▼ CI	ГУ▲	STATE ▲ ZIP CODE ▲
C C00489112		S THIS NET (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	=	y 20 (M5)
(a) Quarterly Reports:			20 (M6) Sep 20 (M9) Dec 20 (M12 (Non-Election Year Only)
April 15 Quarterly Report (Q1)			20 (M7) Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2)	PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Q3)	Report for the:	Convention (12)	C) Special (12S)
January 31 Year-End Report (YE)	Election	on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	on on	in the State of
5. Covering Period 07	01 2016	through	07
I certify that I have examined this	Report and to the best of	my knowledge and bel	ief it is true, correct and complete.
Type or Print Name of Treasurer	David Bauer		
Signature of Treasurer David E	Bauer	[Electronically F	iled] Date 09 16 2016
NOTE: Submission of false, erroneo	us, or incomplete information	n may subject the persor	signing this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

ı	FEC Form 3X (Rev. 02/2003)	RECEIPTS AND DISBURSEMENTS	Page 2
	Write or Type Committee Name JEFF PAC		
_	Report Covering the Period: From: 07	01 / 2016 To:	07 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	-	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		119442.95
	(b) Cash on Hand at Beginning of Reporting Period	168569.63	
	(c) Total Receipts (from Line 19)	15000.00	179958.38
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	183569.63	299401.33
7.	Total Disbursements (from Line 31)	7043.78	122875.48
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	176525.85	176525.85
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	3023.06	
×	This committee has qualified as a multicand	didate committee. (see FEC FORM 1M)	
	Fc	or further information contact:	
		Federal Election Commission 999 E Street, NW Washington, DC 20463	
		Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

1			D	Δ	C
J	Г	Г	\Box	м	C

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:	Total Tills Fellou	Calendar Tear-to-Date
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	5000.00	47700.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add	5000.00	47700.00
Lines 11(a)(i) and (ii)▶	5000.00	47700.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	7 7 7	
(such as PACs)	10000.00	98500.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	15000.00	146200.00
2. Transfers From Affiliated/Other		
Party Committees	0.00	31758.38
O. All Leave Descived	0.00	0.00
3. All Loans Received	0.00	3.00
	0.00	0.00
4. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	7	7 7
to Federal Candidates and Other		
Political Committees	0.00	2000.00
7. Other Federal Receipts		7
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	7	
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
/		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
O. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	15000.00	179958.38
). Total Federal Receipts	45000.00	
(subtract Line 18(c) from Line 19)▶	15000.00	179958.38

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Operating Expenditures: —— (a) Allocated Federal/Non-Federal 	10101 1110 1 0110 1	Galorida. Four to Bato
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	CO 42 79	64704.94
Expenditures(c) Total Operating Expenditures	6043.78	61701.81
(add 21(a)(i), (a)(ii), and (b))▶	6043.78	61701.81
2. Transfers to Affiliated/Other Party	0.00	200
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	1000.00	61173.67
Independent Expenditures		
(use Schedule E)	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(use Scriedule F)		0.00
6. Loan Repayments Made	0.00	0.00
	0.00	0.00
7. Loans Made	0.00	3.50
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
F		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(646) 46 17(66)	7	
(d) Total Contribution Refunds	0.00	
(add Lines 28(a), (b), and (c))▶	0.00	0.00
9. Other Disbursements	0.00	0.00
D. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
F		222
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Dishurasments (add Lines 24/s) 22		
1. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7042 78	122875.48
	7043.78	122073.40
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	7042.70	
from Line 31)	7043.78	122875.48

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page **5**

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	15000.00	146200.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
i. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15000.00	146200.00
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6043.78	61701.81
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	6043.78	61701.81

: 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHŽG7 < 98 I @ 'CF' ± H9 A = N5 H± CB

Form/Schedule: F3XA Transaction ID :

Accrued expense overstated

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 7 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) JEFF PAC			
Full Name (Last, First, Middle Initial) . PECHANGA BAND OF LUISENO IN	IDIA		Date of Receipt
Mailing Address 48245 Pechanga Road City Temecula	State CA	Zip Code 92592	07 05 2016 Transaction ID : INCA711
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 5000.00
Name of Employer INDIAN TRIBE Receipt For:	Occupation SOVEREIG Aggregate		Memo Item
Primary General Other (specify) ▼		5000.00	
Full Name (Last, First, Middle Initial) Address			Date of Receipt
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		Memo Item
Name of Employer Receipt For:	Occupation	Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate)	
Full Name (Last, First, Middle Initial) Mailing Address			Date of Receipt
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer	Occupation		Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)			5000.00
TOTAL This Period (last page this line number	only)		5000.00

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 13 (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)		
Full Name (Last, First, Middle Initial) HONEYWELL INT'L PAC Mailing Address 101 CONSTITUTION AVE. #50 City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General	State Zip Code DC 20001 C C00096156 Occupation Aggregate Year-to-Date ▼	Date of Receipt 07 05 2016 Transaction ID : INCA713 Amount of Each Receipt this Period 2500.00 Memo Item
Full Name (Last, First, Middle Initial) AMERICAN OPTOMETRIC ASSOC. Mailing Address 1505 PRINCE ST. #300 City ALEXANDRIA FEC ID number of contributing federal political committee. Name of Employer	7 7 7	Date of Receipt 07
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 2500.00	
Mailing Address 1125 SEVENTEENTH ST. NOF City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	>	10000.00
TOTAL This Period (last page this line number of	nly)	10000.00

	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b 27	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) JEFF PAC	nents may not be sold or used ne and address of any political	by any perso	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) A. CHASE CARDMEMBER SERVICE Mailing Address P. O. BOX 94014	ES		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PALATINE Purpose of Disbursement CREDIT CARD PAYMENT Candidate Name Office Sought: House Disburser Senate		002 Category/ Type	Transaction ID : EXPB712 Amount of Each Disbursement this Period 1709.28 Memo Item
President State: District: Full Name (Last, First, Middle Initial) B. GIUSEPPE'S CUCINA ITALIANA Mailing Address 891 PRICE ST.	Other (specify) ▼		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PISMO BEACH Purpose of Disbursement MEALS Candidate Name Office Sought: House Senate President State: District:		002 Category/ Type	Transaction ID : EDTB296EXPB712 Amount of Each Disbursement this Period 375.16 Memo Item

TEMIZED DISBURSEMENTS	lloo concrete cohodulo(c) I	FOR LINE NUMBER: PAGE 10 OF 13 (check only one) X 21b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	ents may not be sold or used be and address of any political co	y any person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) JEFF PAC		
Full Name (Last, First, Middle Initial) A. NWL LODGING		Date of Disbursement
Mailing Address 1001 LAFAYETTE DR.		07 05 2016
FARMINGTON	tate Zip Code PA 15437	Transaction ID : EDTB298EXPB712
Purpose of Disbursement LODGING Candidate Name		002 Amount of Each Disbursement this Period
Office Sought: House Disbursem	ent For:	ategory/ Type 838.81
	Primary ☐ General Other (specify) ▼	
Full Name (Last, First, Middle Initial) 3. DAVID BAUER		Date of Disbursement
Mailing Address 2150 RIVER PLAZA DR. #150		07 19 2016
SACRAMENTO Purpose of Disbursement	tate Zip Code CA 95833	Transaction ID : EXPB720
ACCOUNTING SVC. Candidate Name		O01 Amount of Each Disbursement this Period ategory/ Type 910.00
President		Memo Item
State: District: Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement
Mailing Address P. O. BOX 7221		07 19 2016
•	tate Zip Code CA 91109	Transaction ID : EXPB719
SHIPPING Candidate Name		Amount of Each Disbursement this Period stegory/ Type 64.28
		Memo Item
SUBTOTAL of Disbursements This Page (optional)		974.28

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name		l by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) JEFF PAC			
Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS Mailing Address BOX 0001			Date of Disbursement 07 26 2016
- 3	tate Zip Code		Transaction ID : EXPB723
Purpose of Disbursement CREDIT CARD PAYMENT Candidate Name Office Sought: House Disbursem Senate		001 Category/ Type	Amount of Each Disbursement this Period 1106.72 Memo Item
Full Name (Last, First, Middle Initial) 3. CALIF. REPUBLICAN PARTY Mailing Address 1930 W. MAGNOLIA BLVD.			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
BURBANK Purpose of Disbursement DUES Candidate Name CALIF. REPUBLICAN PARTY Office Sought: House Disbursem Senate		001 Category/ Type	Transaction ID : EDTB299EXPB723 Amount of Each Disbursement this Period 900.00 Memo Item
Full Name (Last, First, Middle Initial) JASON LARRABEE Mailing Address 3613 UNDERWOOD ST.			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CHEVY CHASE Purpose of Disbursement CAMPAIGN CONSULTING Candidate Name Office Sought: House Disbursem Senate		001 Category/ Type	Transaction ID : EXPB724 Amount of Each Disbursement this Period 2250.00 Memo Item
SUBTOTAL of Disbursements This Page (optional)		·····	3356.72
TOTAL This Period (last page this line number only).		·····•	6040.28

Transaction ID : EXPB718 Mailing Address City State Category State Category State Category State Category State Category Full Name Category State Category State Category Full Name Category State Category State Category Full Name Catego	SCHEDULE B (FEC Form 3X)	Harana () () ()	FOR LINE NUMBER: PAGE 12		
Inly information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee. NAME OF COMMITTEE (in Full) JEFF PAC Full Name (Last, First, Middle Initial) Date of Disbursement Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Mailing Address City State Senate Senate Senate Senate Senate Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category' Type Amount of Each Disbursement this Period Other (specify) Amount of Each Disbursement this Period Category' Type Amount of Each Disbursement this Period Office Sought: Office Sought: Full Name Office Sought: O	TEMIZED DISBURSEMENTS	for each category of the	21b	22 🗶 23 🔲 24 📗 25 📉 26	
Amount of Each Disbursement Candidate Name Category' Type Category' Type Category' Type Memo Item Candidate Name Category' Category' Type Category' Type Category' Category' Type Memo Item Amount of Each Disbursement this Period Category' Type Category' Category' Memo Item Amount of Each Disbursement this Period Category' Category' Type Memo Item Amount of Each Disbursement this Period Category' Category' Type Memo Item Amount of Each Disbursement this Period Category' Type Memo Item Amount of Each Disbursement this Period Category' Type Memo Item Amount of Each Disbursement this Period Category' Type Memo Item Amount of Each Disbursement this Period Category' Type Memo Item Amount of Each Disbursement this Period Category' Type Memo Item Amount of Each Disbursement this Period Category' Type Memo Item Amount of Each Disbursement this Period Category' Type Memo Item Amount of Each Disbursement this Period Category' Type Memo Item Amount of Each Disbursement this Period Category' Type Memo Item Amount of Each Disbursement this Period Category' Type Memo Item Type Memo Item Amount of Each Disbursement this Period Category' Type Memo Item					
JEFF PAC Full Name (Last, First, Middle Initial) Amount of Each Disbursement District Office Sought: House Disbursement Disbursemen					
Mailing Address 420 W. 7TH ST. City State Zip Code WEST POINT GA 31833 Purpose of Disbursement Candidate Name DREW FERGUSON Office Sought:	, ,				
Mailing Address 420 W. TH ST.	Full Name (Last, First, Middle Initial)				
City State Zip Code GA 31833 Purpose of Disbursement Candidate Name District: 03 Full Name (Last, First, Middle Initial) Candidate Name Category/ Type Disbursement For: 2016 Full Name (Last, First, Middle Initial) Candidate Name Category/ Type Disbursement For: 2016 Full Name (Last, First, Middle Initial) Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type District: Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type District: Category/ Type Date of Disbursement this Period Date of Disbursement this Perio	DREW FERGUSON FOR CONGR	ESS			
WEST POINT Purpose of Disbursement Candidate Name DREW FERGUSON Office Sough: X	Mailing Address 420 W. 7TH ST.			07 14 2016	
Candidate Name DREW FERGUSON Office Sought:	WEST POINT			Transaction ID : EXPB718	
DREW FERGUSON Office Sought:	·		011	Amount of Each Disbursement this Period	
Senate President Other (specify) State: GA District: 03 Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Category/ Type Office Sought: House Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement For: General Other (specify) Memo Item Date of Disbursement this Period Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: General Other (specify) Category/ Type Office Sought: House Disbursement For: General Other (specify) Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: General Other (specify) Senate President Other (specify) Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement This Period Category/ Type Memo Item Memo Item	DREW FERGUSON			1000.00	
Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Primary General Other (specify) Mailing Address City State Zip Code Amount of Each Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate Primary General Other (specify) Office Sought: House Senate Primary General Other (specify) Office Sought: House Disbursement For: Senate Primary General Other (specify) Office Sought: House Disbursement For: Senate Primary General Other (specify) Office Sought: House Disbursement For: Senate Primary General Other (specify) Office Sought: House Disbursement For: Senate Primary General Other (specify) Office Sought: House Disbursement For: Senate Primary General Other (specify) Office Sought: House Primary General Disbursement For: Senate Primary General Other (specify) Office Sought: House Primary General Disbursement For: Senate Primary General Disbursement For: Se	Senate x President	Primary General		Memo Item	
City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Prissident State: District: Full Name (Last, First, Middle Initial) Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement Category/ Type Amount of Each Disbursement this Period Category/ Type Date of Disbursement Category/ Type Office Sought: House Disbursement For: Senate Primary General Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SubtotAL of Disbursements This Page (optional)					
City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House President Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Candidate Name Category/ Type Date of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Candidate Name Disbursement For: Category/ Type Office Sought: House Primary General Other (specify) ▼ Amount of Each Disbursement this Period Category/ Type Memo Item Memo Item Amount of Each Disbursement this Period Category/ Type Office Sought: House Primary General Other (specify) ▼ SubstortAL of Disbursements This Page (optional)	3.				
Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Category/ Type Memo Item Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Amount of Each Disbursement Mamm / Date of Disbursement Amount of Each Disbursement Memo Item Memo Item Senate Primary General Other (specify) ▼ State: District: Substortal of Disbursements This Page (optional)	Mailing Address				
Candidate Name Category/ Type	City	State Zip Code			
Office Sought: House Senate Primary General Other (specify) Type State: District: District: Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Disbursement For: Senate Primary General Category/ Type Office Sought: House Disbursement For: General Other (specify) State: District: Memo Item Amount of Each Disbursement this Period Other (specify) Memo Item Amount of Each Disbursement this Period Other (specify) Memo Item Substrotal of Disbursements This Page (optional)	Purpose of Disbursement			Amount of Each Disbursement this Period	
State: District: Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Substract Senate Primary General Other (specify) Memo Item Substract State: District: Substract Senate Primary General Other (specify) Substract State: District: Substract Senate Primary General Other (specify) Substract State: District: Substract Senate Primary General Other (specify) Substract State: District: Substract State: Disbursements This Page (optional)	Candidate Name	"			
Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)	Senate President	Primary General		Memo Item	
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substruct: M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President President State: District: Subtrotal of Disbursements This Page (optional)	>.				
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Subtrotal of Disbursements This Page (optional)	Mailing Address				
Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substruct: Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item	City	State Zip Code			
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Memo Item 1000.00	Purpose of Disbursement			Assessed of Fact Bills and Silver	
Office Sought: House Senate Primary General Other (specify) State: District: Memo Item Substruct: 1000.00	Candidate Name				
SOBIOTAL OF DISDUISEMENTS THIS Tage (Optional)	Senate President	Primary General			
SOBIOTAL OF DISDUISEMENTS THIS Tage (Optional)				1000.00	
TOTAL This Period (lost page this line number only)	ODDIVIAL OF DISDUISEMENTS THIS Page (optional)		·····		

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 13 OF
FOR LINE NUMBER:
(check only one)

_	
	9
X	10

13

AME OF COMMITTEE (In Full) JEFF PAC		
A. Full Name (Last, First, Middle Initial) of Debto	Nature of Debt (Purpose): FUNDRAISING EVENT	
Mailing Address 5827 COLFAX AVE.		
City State ALEXANDRIA	Zip Code VA 22311	_
Outstanding Balance Beginning This Period		Transaction ID : PAYD732
0.00		
Amount Incurred This Period 3023.06	Payment This Period 0.00	Outstanding Balance at Close of This Period 3023.06
7		
B. Full Name (Last, First, Middle Initial) of Debto	Nature of Debt (Purpose):	
Mailing Address		_
City State	Zip Code	_
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
SUBTOTALS This Period This Page (optional)		3023.06
t) TOTALS This Period (last page this line number	3023.06	
) TOTAL OUTSTANDING LOANS from Schedule	0.00	
) ADD 2) and 3) and carry forward to appropriate	3023.06	